Managerial Competencies as perceived by Nursing Staff and Its Relation to Their Advocacy and Flourishing at Work

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Abstract

Background: Key strategy for the success of health organizations resides in the capacity of the nurse manager to develop advanced competencies in management, and advocate for nurses to serves as the bedrock for supporting problems affecting nursing practice, the nursing profession as a whole, and health care issues, nurse managers are expected to influence the workplace environment and build flourishing teams positively. Aim: to assess managerial competencies as perceived by nursing staff' and its relation to their advocacy and flourishing at work. Research design: A descriptive correlation research design was utilized in this study. Setting: The study was conducted at Minia University Kidney and Urology Hospital. Subjects: All staff nurses available which constitute (N=231), who worked at Minia University Kidney and Urology Hospital during the time of data collection. Tools: three tools as follows; tool (I), Nurse Manager Competence Scale; the first part was personal data, and the second part was the Nurse Manager Competence Scale. Tool (II), Employee Advocacy scale. Tool (III), Flourishing Scale. Results: more than half (52.8 %) of the nurses' perception of total nurse manager competence was high, slightly more than half of them (51.5 %) had a high perception about total employee advocacy, while more than three-thirds (70.5 %) of them highly perceived flourishing at work. Conclusion: There was a strong positive correlation between perceived managerial competencies, nursing staff' advocacy, and their flourishing at work Recommendations: Developing training programs to increase knowledge related to diverse managerial competencies, creating a supportive environment, advocating for better work conditions, and building a culture of inclusion, thus, promoting staff nurses' flourishing at work.

Keywords: Advocacy, Flourishing, Managerial Competencies, Nursing Staff, Perceived

Introduction

Nursing is a crucial profession in hospitals, as nurses are indispensable in all healthcare settings, ensuring their quality of life. Nurse Managers (NMs) worldwide adapt organizations to new challenges and health policy goals, requiring comprehensive competencies for patient care quality and utilizing professional knowledge and administrative power (Wang et al., 2022). Because of a dizzying array of changes in domains such as healthcare policy, diseases and treatments, and the needs of patients and their families, NMs' roles and responsibilities have become more diverse (Demirtaş & Altuntaş, 2023).

Nurse Managers are crucial for creating safe work environments and supporting frontline nurses, impacting organizational success are essential (Mohamed et al., 2023). The nurse managers play a crucial role in health services, influencing service quality and patient outcomes; they oversee nursing staff activities, supervise their work, and coordinate with higher authorities, plan, organize, and control resources to efficiently provide economic care to patients, so, they must possess essential competencies to support nurses and ensure adequate resources (Motacki & Burke, 2022).

Nurse Managers' competency is their ability to use the nursing process to evaluate the efficiency and effectiveness of patient care delivery by the nursing staff to support optimal patient outcomes (Aghabarary et al., 2023). In the Nurse Manager Core Competency model of the American Organization for Nursing Leadership (AONL), the anchoring domain anchors the five core domains: (a) Communication

and Relationship Building, (b) Knowledge of the Health Care Environment; (c) Leadership; (d) Professionalism; and (e) Business Skills and Principles (AONL, 2023).

Effective communication is a key competency for nurse managers enhancing patient outcomes through advanced education, relationship management, understanding employees, and effective use of digital platforms for workplace management (Rabiul et al., 2023). nurse managers possess a comprehensive understanding of the healthcare environment, including nursing practice, economics, policy, regulation, evidence-based practice, patient safety, and quality, transforming care delivery models, recognizing internal and external factors, and formulating objectives (Hughes et al., 2022; Menjivar, M. C. 2023).

Nurse managers as Leaders are competent in envisioning a new and better world, communicating vision to others, motivating and enticing them to join in efforts to realize the vision, thinking differently, challenging the status quo, taking risks, and facilitating change (Charalambous, 2023). Nurse Managers aim to maintain professionalism by recognizing career opportunities, advocating for healthcare policy, promoting patient care, implementing culturally competent healthcare, and addressing social determinants (AONE, 2022, Hughes et al., 2022).

Business Skills and Principles shape the fifth anchor of AONL model, nurse managers are crucial in integrating clinical care with organizational management, requiring a blend of business competencies including budgeting, strategic management, and resource management. They manage

financial resources, set objectives, and implement goals, while efficiently using human, material, and technological resources for quality care (AONL, 2023; Zhang & Bohlen, 2023). All these competencies have the potential to significantly reduce organizational costs while also providing higher-quality services (Mohamed et al., 2023).

Advocacy is a crucial competency for nurse managers requiring knowledge, experience, self-confidence, and courage to advocate for patients, families, communities, organizations, professions, and society (Curry& Duffy, 2023). Besides the administrative role of nurse managers; they advocate for fellow nurses, improving working conditions and patient safety, and representing staff in healthcare policy development. Trust and positive attitudes increase when managers uphold nurses' interests (Pursio et al., 2023).

Nurse Managers can boost nurses' power, professional status, and job satisfaction through advocacy, enhancing productivity, employee retention, and fostering organizational flourishing through concept, implementation, benefits, and objectives (Heck et al., 2022). nurse managers can advocate by bringing about positive change in healthcare organizations in some ways such as allocation of resources, building a healthy work environment, addressing challenges to advocacy, and rewards of advocacy outweigh the challenges (White, 2022).

Flourishing, the combination of feeling good and functioning effectively is crucial for nurses' performance and absenteeism (A'yuninnisa et al., 2023; Naim& Ozyilmaz, 2023). The acronym <u>FLOURISH</u> revealed a model with eight characteristics spelled out Fantastic Teams (F), Life-giving work (L), Outstanding talent (O), Uplifting growth (U), Rewarding compensation (R), Inspirational leadership (I), Sustainable strategy (S), and Healthy communication (H) (Vonk, 2023).

Fantastic teams are effective, competent, and passionate about resolving conflicts and striving for excellence. They are life-giving, utilizing staff's skills and spiritual gifts to their fullest potential. Outstanding talent is recruited and retained, and growth and development are uplifted. Rewarding compensation is provided, and inspirational leadership is authentically demonstrated. A sustainable strategy is adopted, meeting the needs of the organization while nourishing long-term loyal relationships. Healthy communication is fostered, with active listening and active employee involvement (Vonk, 2023; Thakadipuram, 2024).

Nurse Managers must adapt to complex healthcare challenges by creating a supportive environment and nurturing a flourishing team. Effective leadership involves using competencies, strategies, and resources for professional growth. Advocating for nurses' organizational identification and self-adaptation is crucial for collective thriving in the nursing workforce (Rony et al., 2023; Zhai et al., 2023).

Significance of the study

The nurse mangers around the world work under constant pressure to adapt their organizations to new challenges and health policy goals. Thus, they require a comprehensive set of competencies. Nurse's trust in their managers, as well as positive actions and attitudes toward the healthcare organizations, rise when managers uphold employees' interests (Pursio et al., 2023). Flourishing is extremely important, because vitality and learning are the two

key factors in improving nurses 'performance and well-being (Johnson, 2022).

From the researcher's experience during clinical training of students at Minia University Kidney and Urology Hospital, the researcher noted that advocacy can be a powerful tool for managers, boosting productivity and employee retention, which helps the hospital flourish. However, no attempt has been made to investigate how nurses at Minia University Kidney and Urology Hospital perceive the influence of managerial competencies on advocacy and flourishing at work. So, the current study aimed to assess managerial competencies as perceived by nursing staff and its relation to their advocacy and flourishing at work

Aim of the study

The current study aimed to assess managerial competencies as perceived by nursing staff and its relation to their advocacy and flourishing at work.

Research Questions:

- 1. What are the levels of perceived managerial competencies, advocacy, and flourishing at work among staff nurses?
- 2. Is there a relationship between perceived managerial competencies, nursing staff's advocacy, and their flourishing at work?

Subjects and Methods

Research Design:-

A descriptive correlation research design was used to achieve the aim of the current study.

Setting: -

The study was conducted at the Minia University Kidney and Urology Hospital. The hospital is selected randomly from Minia University Hospitals, Minia City, Egypt.

Subjects: -

Study subjects included all available staff nurses during data collection at Minia University Kidney and Urology Hospital. The total number was '\(^\gamma\) nurses

Tools of Data Collection:

Including three tools of data collection as following:

Tool (I): Managerial Competence Scale: This scale was divided into two parts:

Part I: Personal Data: This part was intended to collect data about studied nursing staff (such as age, gender, educational qualification, marital status, years of experience, residence, and department).

Part II: Managerial Competence Scale: -

It was adopted by (Choi et al., 2022), for assessing the managerial competencies of their head nurse as perceived by nursing staff. This scale was translated into Arabic by the researcher. It consisted of 60 items that were categorized into five dimensions: Staff Advocacy and Development (12 items), Team Communication and Collaboration (15 items), Change and Resource Management (10 items), Quality Monitoring and Pursuance (11 items), and Personal Mastery (12 items). Items included in each dimension are presented in the following table:

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Scoring System: Each item in the Managerial Competence Scale was measured using a three-point Likert scale, with options included "disagree" = 1, neutral = 2, and " agree" = 3. Classification of total score levels are shown in the following table:

Table (2): Scoring System of Managerial Competence Scale:

Managerial Competence dimensions	No. of Items	Low	Moderate	High
Staff Advocacy and Development	12	12-19	20-27	28-36
Team Communication and Collaboration	15	15-24	25-34	35-45
Change and Resource Management	10	10-16	17-23	24-30
Quality Monitoring and Pursuance	11	11-17	18-25	26-33
Personal Mastery	12	12-19	20-27	28-36
Total managerial competence	60	60-99	140	141- 180

Tool (II): Employee Advocacy scale:

The Employee Advocacy scale adopted in the current study was developed by **(Yeh, 2014)** and translated into Arabic by the researcher to evaluate advocacy among nursing staff, it included (6) items.

<u>Scoring System:</u> Each item was measured by using a three-point Likert scale, with options included "disagree" = 1, neutral =2, and "agree "= 3. Classification of total score levels are shown in the following table:

Table (3): A scoring system of the Employee Advocacy scale

Total advocacy	No. of Items	Low	Moderate	High
	6	6-10	11-14	15-18

Tool (III): Flourishing Scale (FS):

The Flourishing Scale (FS) was adopted in the current study and was developed by (Diener et al., 2010) and translated into Arabic by the researcher to evaluate flourishing among nursing staff, it included (8) items.

Scoring System:

Each item was measured by using a three-point Likert scale, with options included "disagree" = 1, neutral =2, and "agree "= 3. Classification of total score levels are shown in the following table:

Table (4): A scoring system of the Employee Advocacy scale

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	Total flavoishing of mode	No. of Items	Low	Moderate	High
	Total flourishing at work	8	8-13	14-18	19-24

Validity of the scales:

A panel of five nursing administration experts, consisting of one Professor and four Assistant Professors from the Faculty of Nursing at Minia University, conducted face and content validity to the scales. Each expert was tasked with evaluating the scale for various aspects such as content coverage, clarity, wording, length, format, and overall appearance. The necessary adjustments were made according to the recommendations of the jury panel.

Reliability of the scales:

The reliability of the scales was examined through the application of the Cronbach alpha test to confirm the consistency of the study scales. The results of this test indicated a high level of internal reliability of the scales.

Table (5): Reliability analysis of the study tools:

The study Tool	α
Total managerial competence	0.94
Total advocacy	.95
Total flourishing at work	.90

Pilot Study:

Pilot research involving 10% of nurses, (23) nursing staff carried out to determine the clarity, completeness, and application of the scales as well as to determine the proper time needed to fill the tools. The pilot research' findings were added to the final results without alteration

Data Collection Procedure:

- The Dean and the Ethical Committee of Nursing Faculty at Minia University granted an official letter to carry out the study.
- The scales were translated into Arabic and approved by the jury for data collection purposes.
- The Minia University Kidney and Urology Hospital's director was provided written approvals after being informed about the study's purpose.
- With permission in hand, the researcher introduced herself to the hospital department head nurses and the nursing staff. She explained the nature and objectives of the study, as well as how to complete the scales.
- The estimated time for completing the questionnaire was determined after conducting the pilot study, ranging from 35 to 40 minutes.
- The researcher planned and scheduled visits to each department. The researcher met studied nurses for data collection two days per/week rely on their respective work schedules.
- The researcher, with the help of the head nurses, personally distributed the scales to all nursing staff during regular working days.
- The researcher started collecting data from the participants at their workplace by providing an oral explanation of the study's type and objectives.
- Then the study tools were distributed to the participants at their workplace individually by the researcher.
- The participants were asked to fill out questionnaires; each nurse was provided with their own set of scales and given a timeframe of 35 to 40 minutes to complete them. The researcher was available to answer any questions that the nursing staff had.
- The data collection phase took place over four months, starting from March 2024 and concluding in June 2024.

Ethical Consideration:

- The Research Ethics Committee of the Faculty of Nursing at Minia University provided written approval for conducting the study.
- 2. The purpose of the study was explained to the directors of Minia University Kidney and Urology Hospital, and written approvals were obtained from

them.

- Oral consent was obtained from each participant before the pilot study and the actual study, after explaining the nature and purpose of the study.
- Participants were informed that they had the right to refuse to participate or withdraw from the study at any time without providing a reason.
- Participants were assured that their data would be kept highly confidential, and their privacy was protected by assigning a number to each nurse instead of using their names.

Statistical Design:

The collected data was tabulated, computerized, analyzed and summarized by using descriptive statistical tests to test research questions by using SPSS version (25).

Qualitative data were expressed as frequency and percentage. Probability (P-value) is the degree of significance, less than 0.05 was considered significant. The smaller the P-value obtained, the more significant is the result (*) and less than 0.001 was considered highly significant (**). T-test and ANOVA test was used for qualitative data test was used to detect the relation between personal data of nursing staff and their study variables.

The statistical method of correlation is used to determine the type and degree of a link between two numerical variables. The co-sign efficient's indicate the type of the relationship (positive/negative), while the value indicates its strength, as follows: Rho values below 0.25 indicate a weak correlation, 0.25-0.499 indicates a fair connection, 0.50-0.74 indicates a moderate correlation, and values above 0.74 indicate a strong correlation.

Results

Table (1): Percentage distribution of the nurse's personal data (no=231).

Items	Nurses	Nurses (no.= 231)		
	no.	%		
Age				
•20-<29yrs.	112	48.5		
•29-<39yrs.	72	31.2		
•39-<49yrs.	37	16		
•>49yrs	10	4.3		
$Mean \pm D$	24.57	78± 4.32		
Educational qualification				
Diploma degree of nursing	32	13.9		
Technical institute of nursing	56	24.2		
Bachelor of degree of nursing	134	58		
•Others	9	3.9		
Years of experience				
•< 5yrs.	78	33.8		
•5-10yrs.	95	41.1		
•> 10 yrs.	58	25.1		
Mean ± SD	5.78	5.789± 2.32		
Residence				
• Urban	124	53.7		
• Rural	107	46.3		

Table (1): Shows that, the ages of (48.5%) of the studied nurses are between 20-29 yrs, with a mean age of (24.578 ± 4.32) years, (58%) of them have a bachelor's degree in nursing, while, (41.1%) of the studied nurses have years of experience between 5-10 yrs with a mean (5.789 ± 2.32) years of experience. Moreover, 53.7% of the studied nurses reside in urban areas.

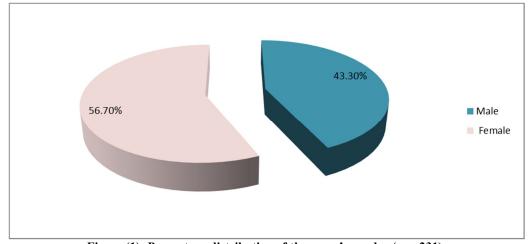


Figure (1): Percentage distribution of the nurse's gender (no.=231).

Figure (1): Shows that, (56.7 %) of the studied nurses are female. while, (43.3 %) of them are male.

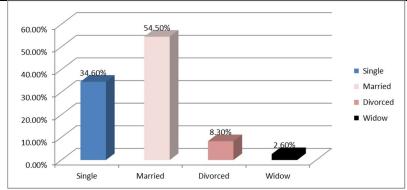


Figure (2): Percentage distribution of the nurse's marital statues (no.=231).

Figure (2): Shows that, (54.5 %) of the studied nurses are married; followed by (34.6 %) of them are single. while, (8.3 %) of them are divorced, and the least percentage (2.6 %) of them are widows.

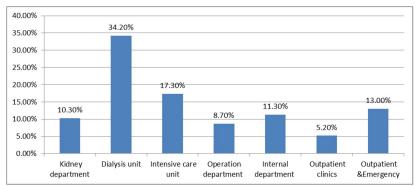


Figure (3): Percentage distribution of the nurse's departments (no.=231).

Figure (3): Shows that, (34.2 %) of the studied nurses work in the dialysis unit, (17.3 %) of them work in the intensive care unit, (13 %) work in the outpatient and emergency unit, and finally (11.3 %) of them work in the internal department.

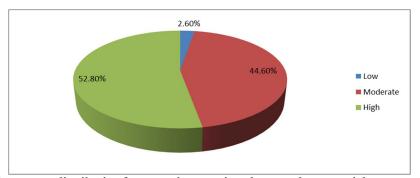


Figure (4): Percentage distribution for nurses' perception about total managerial competence (no.=231)

Figure (4) Shows that, (52.8 %) of the studied nurses have high level of perception about total managerial competence, (44.6 %) of them have moderate level. while, (2.6 %) of them have low level of perception about total managerial competence

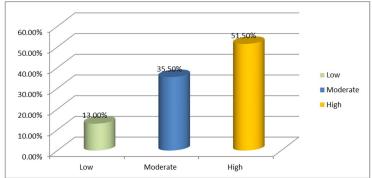


Figure (5): Percentage distribution for nurses' perception about total employee advocacy (no=231)

Figure (5) Shows that, (51.5 %) of the studied nurses have high level of perception about total employee advocacy, (35.5 %) of them have moderate level. while, (13 %) of them have low level of perception about total employee advocacy.

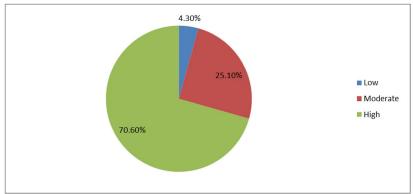


Figure (6): Percentage distribution for nurses' perception about total flourishing at work (no.=231)

Figure (6): Shows that, (70.5 %) of the studied nurses have high level of perception about total flourishing at work, (25.1 %) of them have moderate level. while, (4.3 %) of them have low level of perception about total flourishing at work.

Table (2): Correlation between competencies, as well as advocacy and nurse's flourishing at work (no. = 231).

Items		Competencies	Advocacy	Flourishing
Competencies	R	1	.634**	.571**
	P- value	1	.000	.000
Advocacy	R		1	529**
	P- value	-		.000
Flourishing	R			1
	P- value	-		

Table (2): Illustrates that, there is a strong positive statistically significant correlation between the nurse's perception about managerial competencies, advocacy and their flourishing at work.

Discussion

Managerial competencies are critically important in nursing, as perceived by the nursing staff, because nursing directly impact both the quality of care and the work environment. Effective managers are seen as those who possess a strong blend of leadership skills, communication abilities, and problem-solving techniques (Mirzaei et al., 2024; Ortega-Lapiedra et al., 2023). Nursing staff value managers who can inspire and motivate their team, foster a supportive and collaborative work atmosphere, and navigate complex situations with a strategic mindset. Competencies as decision-making, emotional intelligence and conflict resolution are highly regarded, as nursing contribute to a more efficient, harmonious, and patient-centred care environment (Rodríguez-Pérez et al., 2022).

Regarding personal data, the current study result showed that less than half of studied nurses aged between (20-<29) years with mean age (24.578±4.32) years, more than half of them had a bachelor degree of nursing. As for the experiences by years, two-fifth of them had from five to ten years. Regarding to their residence more than half of them living in urban area, also it was noted that more than half of them were females. Concerning to marital status, more than half of them were married and the lowest percentages were divorced, and concerning to their department about one third of them working at Dialysis Unit and the lowest percentages working at outpatient clinics.

Concerning to the nurses' perception level regarding total nurse competencies, the current research demonstrated that more than half of nurses had a high perception level of managerial competencies, This result could be due to the presence of a supportive environment for Nursing Managers (NMs) from hospital administration that provide opportunities for their advancement and encourage them to learn from the experiences, Moreover, Minia

University Kidney and Urology Hospital provide greater performance appraisals, provides nurse managers with continuous training and education programs which help to update their knowledge and improve their skills and competence. nurse managers effectively support staff, manage resources, and demonstrate strong leadership that positively impact and have the power to inspire and motivate their teams.

This result is in the same line to finding of Mirzaei et al., (2024), who reported that more than half of the participants perceived nurse manager competence with mean (3.06±1.24). Also, this result is parallel with finding of Hussein & Badran, (2021) who found that less than three quarters of staff nurses had high perception level toward total manager competence. Furthermore, this result is consistent with the finding of Choi et al., (2022) who revealed that staff nurses in their study reported a more positive perception towards nurse manager' competencies (SD = 0.859). In contrast, this result is not consistent with finding of Ahmed & Abd-ElGhani, (2021) who stated NMs were perceived to have moderate level of competency.

Concerning to studied nurses' perception about total employee advocacy, the current study reported that more than half of studied nurses highly perceived total employee advocacy. From researcher's point view, this may be due to competent nurse managers who attempt to improve employee satisfaction, their ability to protect their rights and provide tools to help them to solve their problems as previously reported by nurses about their managers competences. This result is consistent with finding of Awad et al., (2024) who found that the perception about total employee advocacy was high among more than one half of the studied nurses.

Regarding to nurses' perception about total flourishing at work, the present research highlighted that more than two third of the studied nurses had a high

perception about total flourishing at work. In the researcher's point of view, the nurses' high level of perception about their managers' competences and advocacy as they perceived that their managers were competent, providing sufficient job resources, enhancing autonomy and opportunities for growth and development, thus, nurses are likely to feel intrinsically motivated at work. In addition, it will foster their well-being which in turn enhances flourishing at work preventing them from burning out.

This result was in the same line with the study findings of **Shdaifat et al., (2024)** who reported that the mean scores of overall flourishing in their study were high showed high levels of overall flourishing among participants (74.2±14.8). Also, the study of El-Gazar & Zoromba, (2021) demonstrated high levels of flourishing among studied nurses. But, this result is contraindicated with the study findings of **Xin et al., (2023)** who reported that the level of flourishing among studied clinical nurses was above the average.

Concerning correlation between competencies as well as advocacy and nurse's flourishing at work, the present study findings reported a strong positive correlation between perceived managerial competencies as well as advocacy and nurse's flourishing at work. One possible explanation is that nurses may feel well supported from manager and hospital administration about their working conditions, which in turn made them less likely to develop adverse mental health outcomes and encouraged them to work well; receiving support and recognition is thought to be a major driver of flourishing and important for avoiding burnout. It is also possible that nurses may have felt a deeper sense of personal achievement, which has an important role in enabling nurses to perform well mentally and at work; flourishing occurs when individuals connect to intentional and meaningful practices.

This result is consistent with the findings of Mohamed et al., (2023) who revealed that improved head nurses' competencies increased flourish at work among studied nurses. As well as, this result was in the same line with the finding of Oliveira-Silva & Porto (2021), who reported that higher levels of professional competency was a predictor of higher levels of subjective wellbeing and flourishing at work. Additionally, this the current study result is congruent with the study of Chang, et al (2022) who reported that strengthening nursing management, nursing performance, safety practices, and group communication while encouraging future international collaboration, as a result of all of this, work flourishes.

Conclusion:

The current research concluded that more than half of the studied nurses had high perception level of managerial competences and advocacy while, more than two third of them had a high perception about total flourishing at work. There was a strong positive correlation between perceived managerial competencies as well as advocacy and flourishing at work among studied nurses.

Recommendation: -

In view of the results of this study, we suggested the following recommendations: -

Increasing level of hospital administrative support to NMs by providing appropriate and relevant knowledge, skills, and attitudes to enable them to continuous improving their competencies.

- Implementing training programs to improve qualities and abilities, and increase awareness of nurse mangers about required competences. Also, integrating these managerial competencies in nursing students' curriculums.
- Enhance communication skills between all health care team to improve work conditions, nurses' success of goals and objectives should be acknowledged and rewarded, in an effort to enhance flourishing at workplace.
- The nurses should be advocate, supportive, and guides the nurses in all situations.

Conduct further research about:

- The Role of Managerial Competencies in Enhancing Job Satisfaction among Nursing Professionals.
- The Relationship between Advocacy Skills and Empowerment among Nurses.
- The Influence of Workplace Culture and Leadership Styles on Nurses' Flourishing at Work.
- The Impact of Workplace Recognition and Rewards on Nurses' Flourishing

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